

## PART 3 - FEE(S) TRANSMITTAL

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007812 7590 11/04/2003

SMITH-HILL AND BEDELL  
12670 N W BARNES ROAD  
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PORTLAND, OR 97229



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|                           |                    |
|---------------------------|--------------------|
| Penelope Stockwell        | (Depositor's name) |
| <i>Penelope Stockwell</i> | (Signature)        |
| December 15, 2003         | (Date)             |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/394,747      | 09/13/1999  | ROBERT W. HUDELSON   | 1695                | 4818             |

TITLE OF INVENTION: METHOD AND APPARATUS FOR EMBEDDING DIGITAL AUDIO DATA IN A SERIAL DIGITAL VIDEO DATA STREAM

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | YES          | \$665     | \$0             | \$665            | 02/04/2004 |

| EXAMINER          | ART UNIT | CLASS-SUBCLASS |
|-------------------|----------|----------------|
| DESIR, JEAN WICEL | 2614     | 348-462000     |

|  |   |
|--|---|
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).   | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |
| <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  | <i>John Smith-Hill</i>  |
| <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | <i>Smith-Hill and Bedell</i>  |

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

NVISION, INC.

Grass Valley, California

Please check the appropriate assignee category or categories (will not be printed on the patent);  individual  corporation or other private group entity  government

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 Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies 1 The Director is hereby authorized to charge the required fees, or credit any overpayment, to Deposit Account Number 19-2500 (enclose an extra copy of this form).

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(Authorized Signature)

(Date)

12/15/03

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01 FC:1501

1330.00 OP

02 FC:8001

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